



Fort Stewart Summer Youth Volunteer Program 2007

The following items are required in order to complete your Youth Volunteer application file. Please note that the items need to be turned in to the American Red Cross Fort Stewart, Work Permit obtained and Orientation completed by May 31, 2007. Requests after this date will not be accepted.

- _____ Completed Georgia Work Permit (**required of all youth under age 18**). Work permits are available at the Liberty County Board of Education Office, located on the corner of Gen. Screven Way and Gause Street (behind Bradwell Institute), telephone 876-2161.
- _____
 - Application
 - Statistical Information (Optional)
 - Code of Conduct
 - Intellectual Property Agreement
 - Signed Parent Permission Slip
 - Fort Stewart Volunteer Registration Form

Required for those individuals wanting to volunteer at the Winn Army Community Hospital or with animals at the Fort Stewart Veterinary Clinic.

- _____ Occupational Health Screen Certificate*, available from Occupational Health Clinic, Bldg. 308, located behind emergency room at Winn Army Community Hospital.

Youth Questionnaire

Military Family Member Id Card Holder (circle): **YES** **NO**

I plan to volunteer: (check one)

- _____ 20 hours to fulfill my minimum school requirement
- _____ For the duration of the program (June 11- July 20)

Please indicate your preferred volunteer location (NOTE: placement in your preferred location is not guaranteed, but will be considered):

- _____ Hospital _____ Library _____ Vet Clinic _____ Museum
- _____ Fitness Center _____ Red Cross _____ Other (specify) _____



American Red Cross, Fort Stewart

To: Parents of Youth Volunteers

Date: Summer Program 2007

From: Station Manager
Fort Stewart, GA

Subject: Permission Slips for Youth
Volunteer Program

I understand that I must attend the Red Cross Orientation and that additional training may be required to satisfy requirements of the volunteer position to which I am assigned. I have been advised that as an American Red Cross volunteer, I am not paid for my services. Also, I have been advised and understand that all personal information regarding clientele of the American Red Cross is confidential and that release of this information is grounds for dismissal from the volunteer program.

Signature of Youth Volunteer

I hereby authorize my child to participate as a Youth Volunteer with the American Red Cross. I understand that a uniform and/or a dress code may be required in order for my child to participate in the volunteer program.

Signature of Parent/ Guardian

I hereby authorize the release of information and photos of my teenage child volunteering with the American Red Cross to publications and newspapers to help tell the organization's story.

Signature of Parent/ Guardian